

<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			<b>Docket No.</b> <b>RSW920000182US1</b>
Applicant(s): <b>Frederick D. Busche</b>			
<b>Serial No.</b> <b>09/838,732</b>	<b>Filing Date</b> <b>04/19/2001</b>	<b>Examiner</b> <b>Wilbert L. Starks</b>	<b>Group Art Unit</b> <b>2121</b>
Invention: <b>METHOD AND SYSTEM FOR SAMPLE DATA SELECTION TO TEST AND TRAIN PREDICTIVE ALGORITHMS OF CUSTOMER BEHAVIOR</b>			
<p>I hereby certify that this <u>Change of Corr. Address, Auth. to Act in a Representative Cap., Cert. of Facs.</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)</p> <p>on <u>01/5/05</u> (Date)</p> <p><u>Colleen Bulman</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u>Colleen Bulman</u> (Signature)</p>			
Note: Each paper must have its own certificate of mailing.			

Sample Form (03-04)

**AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY**


In re Application of:	
Frederick D. Busche	
Application No.	09/838,732
Filed:	04/19/2001
Title:	METHOD AND SYSTEM FOR SAMPLE DATA SELECTION TO TEST AND TRAIN PREDICTIVE ALGORITHMS OF CUSTOMER BEHAVIOR
Attorney Docket No.	RSW920000182US1
Art Unit:	2121

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Duke Yee Yee & Associates, P.C. 4100 Alpha Road, Suite 1100 Dallas, TX 75244 US	34285

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

**SIGNATURE of Practitioner of Record**

Name	John R. Pivnichny		
Signature		Date	01/05/05
Registration Number	43,001	Telephone	607-429-4358

This form offers a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

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